

State Interagency Council (SIAC)

“Promoting healthy children across Kentucky:

Building a collaborative System of Care to promote children’s social, emotional and behavioral well-being where they live, learn and play.”

SIAC Meeting December 10, 2014

Members/ Designees Present:

Mary Reinle Begley (DBHDID)
Rachel Bingham (AOC)
Laura McCullough (KDE)
Allie Rigsby (KPFC/ KY YOUTH MOVE-SIAC Youth Member)
Lee Ann Kelley (KPFC/ SFAC-SIAC Parent Member)
Brandon Kelley (KPFC/ KY YOUTH MOVE-SIAC Youth Alternate)
Melissa Goins (FRYSC)
Amy Cooper-Puckett (CCSHCN)
Pam Cotton (DCBS)
Lisa Lee (DMS)
Tal Curry (DPH)
Bill Heffron (DJJ)

Guest List:

Eric Friedlander (Deputy Secretary of CHFS)
Andrea Keith (Seven Counties Services/Local Resource Coordinator_6S)
Kelly Dorman (DCBS/ RIAC Chair_6S)
Dr. Ruth A. Shepherd (DPH/ MCH)
Kim Brothers (Seven Counties Services)
Dr. Brenzel (DBHDID)
Natalie Kelly (DBHDID)
Vestena Robbins (DBHDID)
Heather Dearing (CHFS)

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Kristal Hankinson (DPH/ Early Childhood)
Beth Jordan (DBHDID)
Beth Potter (KICC/ KY SEED)
Janice Johnston (DBHDID)
Chris Whitsell (Bluegrass-CSD)
Jill West (Cumberland River-CSD)
Tena Sewell (Cumberland River-LRC)
Mary Wells (Cumberland River)
Angela Parker (Mountain Comp Care Center-LRC)
Chelsea Sullivan (Communicare-LRC)
Dawna Lewis Eplion (Pathways-FIVCO; LRC)
Kate Dean (RIAC Policy Advisor/ DBHDID)
Kristin Knight (AOC)
Angela Morris (AOC)
Allyson Taylor (DPH)
Joy Varney (KPFC)
Christopher Duckworth (KY SEED/ KICC)
Diane Gruen-Kidd (DBHDID)
Mark Hertweck (DBHDID)
Kate Tilton (KPFC)
Carmilla Ratliff (KPFC)
Whitney Hayse (P &A)
Brigid Adams Morgan (Passport Health Plan)
Kimberlee Richardson (MH Net)
David Crowley (Anthem Medicaid)
Jeff Sutherland (Anthem Medicaid)
Andrew Fox (Anthem Medicaid)

Staff:

Martha Campbell, SIAC Administrator (DBHDID)
Meghan Wright, Training Assistant (DBHDID)

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Agenda Item	Discussion	Action/Priorities/Recommendations
SIAC Welcome and Introductions	SIAC Chair, Mary Reinle Begley, Commissioner of DBHDID, called the meeting to order and called for introductions of SIAC members, designees, presenters and guests	
Review of 11/12/2014 SIAC Meeting Summary	Motion made and seconded to accept the meeting summary with no changes.	Minutes Adopted
System of Care “Youth Guided” Care Update- Allie Rigsby (SIAC Youth Member)	<u>Youth Guided Update</u> Allie Rigsby, SIAC Youth Member, and Brandon Kelly, SIAC Youth Designee, were not able to attend SIAC in December 2014. The Youth Report will be provided in January 2015.	Youth Report is postponed until January 28, 2015
System of Care “Family Driven” Care Update- Lee Ann Kelley (SIAC Parent Member & member of the State Family Advisory Council)	<u>Family Guided Update</u> Ms. Kelley began her position as a Family Peer Support Specialist, in December 2014, at the Pathways Community Mental Health Center in Region 10. <u>Ms. Kelley provided regional activities from the following:</u> <ul style="list-style-type: none"> ➤ Adanta Region-Emily Eldridge, Family Liaison, arranged for Joy Varney of KPFC to conduct training for Parents on Special Education Law. ➤ North Key Region- Sally Rooney & Brenda Nicholas, Family Peer Support Specialists, arranged for the Family Nurturing Center to present on adolescent/ teen behavior. ➤ Communicare – Laura Jean Wood Perez, Family Peer Support Specialist, attended Special Ed Training on Developmental Disabilities & serves as an independent contractor for the Council on Dev. Disabilities in the role of Project Director (bi-lingual) for the Hispanic Outreach & Support Initiative funded by Brown Foreman grant; developing relationships with agencies that serve Hispanic/ Latina community in the Louisville area- applying her skills as a Peer Support Specialist to help agencies understand how to connect constituents to the Council and systems of care available for families who have members with special needs. ➤ Campbell County, KY – Kim Wright, Independent Parent Leader 	For more information on the State Family Advisory Council and KY’s Family Movement, contact LeeAnn Kelley, SIAC Parent Member at lak77goherd@yahoo.co

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	<ul style="list-style-type: none">• Ms. Wright and other Parent Leaders are helping with Narcan education, training and distribution to family and community members (utilized to reverse opiate-heroin overdoses).• Parent leaders are working with groups/schools to educate about dangers of addiction & helping get people into treatment.• Parent Support Groups held twice a month for families w/transition age youth with a substance use disorder; they have connected over 40 youth, ages 18-26, with appropriate treatment.• Parent leaders provide resources to families seeking treatment and help them file Casey's Law, an intervention for youth over 18, mandating them into treatment through the courts. <p>➤ Pathways Region – Becky Burton, Kentucky Family Peer Support Specialist</p> <ul style="list-style-type: none">• Assisting people get health insurance through kynect.• Ordered Truth About Drugs, a free kit on drugfreeworld.org with information and a DVD for parents/caregivers; presentations begin 1/2015.• Now working in Pathways office as a Family Peer Support Specialist.	
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<p>System of Care Expansion and Redesign Action Items</p> <p><u>Operationalizing SIAC's Approved SOC Redesign & Expansion Recommendations</u></p> <p>Commissioner Mary Reinle Begley (DBHDID), SIAC Chair</p> <p>and</p> <p>Heather Dearing, Policy Advisor (CHFS)</p>	<p><u>SIAC Chair appointed Standing Committee Chairpersons on 12/10/2014; SIAC adopted:</u></p> <ol style="list-style-type: none"> 1. Continuous Quality Improvement –Rachel Bingham (AOC) 2. System Structure: Mary Begley (DBHDID) 3. Finance & Resource- Adria Johnson (DCBS) 4. Training & Technical Assistance- Beth Potter (KICC/DBHDID) 5. Service Array –Melissa Goins (FRYSC) <p><u>Membership on Standing Committees</u></p> <ul style="list-style-type: none"> ➤ Information was distributed to SIAC and Standing Committee Chairpersons outlining potential responsibilities of each committee and discussing committee membership. ➤ Committee Chairs are encouraged to assume responsibility for membership, and further encouraged to consider including community partners/ agencies/ organizations not represented on SIAC. SIAC representatives will also serve on Standing Committees. ➤ It is important that members have a passion for the population served by SIAC and bring particular area(s) of expertise to the Committee on which they serve. ➤ Persons interested in becoming a member, Contact the chairperson directly to state your interest or to recommended member(s) by January 12th or 13th, 2015. ➤ Recommendation is to limit Standing Committee membership to 12-18 members. <p><u>System Structure Committee will look at the frequency & structure of SIAC meetings</u></p> <p>Commissioner-level SIAC meetings are planned for January, April, July, and October of 2015 and the Standing Committees are to meet the remaining 8 months. On months when Standing Committees meet, the tentative plan is to hold a full SIAC meeting for 30 minutes, followed by the Standing Committees each meeting for 1 hour and reconvening the full SIAC for the final 30 minutes to report on progress where applicable.</p> <p>This option will allow the full SIAC to continue addressing business issues where needed during the months when the Standing Committees meet.</p> <p>Laura McCullough (KDE) suggested that SIAC may want to come back together as a whole following committee meetings for a time of wrap up and in case a discussion was sparked that required the input of the full group.</p>	<p>SIAC Chair Appointed Standing Committee Chairpersons; all were adopted by SIAC.</p> <p>Standing Committee Chairs are encouraged to include members who are not represented on SIAC.</p> <p>Send membership recommendations/ inquiries to: Heather.Dearing@ky.org Vestena.Robbins@ky.gov</p> <p>Cc: Martha.Campbell@ky.gov</p> <p>Commissioner-level SIAC meetings are scheduled in: January, April, July, October</p> <p>Standing Committees will meet the other months and be responsible for reporting progress to SIAC.</p> <p>Standing Committees hold their first meeting in 2/2015 to discuss meeting dates, responsibilities, and work plans.</p>
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<p><u>Transition Age Initiatives</u> Janice Johnston, Program Administrator (DBHDID)</p> <p><u>Transition Age Youth</u> <u>(TAY) Launching Realized</u> <u>Dreams Grant(TAYLRD)</u></p> <p><u>COORDINATED</u> <u>SPECIALTY CARE: First</u> <u>Episode Psychosis(FEP)</u></p>	<p><u>Transition Age Youth Launching Realized Dreams Grant awarded 10/2014-TAYLRD</u></p> <p>KY's project will improve access to treatment & support services for youth/ young adults b/t 16 & 25 that have, or are at risk of developing serious behavioral health. Goals: (1) Enhance infrastructure to support implementation, expansion & sustainability of TAY supports/services across agencies; (2) Promote public awareness of signs/symptoms for serious behavioral health concerns; (3) Increase outreach & engagement to youth/young adults who have or are at risk of developing behavioral health issues and their family members; (4) Improve access to a culturally competent, youth/young adult driven array of effective clinical interventions in 2 CMHC regions of KY (Pathways & Seven Counties) by implementing a specialized array and continuum of evidence-supported services and supports for TAY in a youth friendly environment that will include awareness activities, outreach and engagement, screening, assessment, treatment and coordination of care; and (5) Develop a continuous quality improvement (CQI) process.</p> <p><u>COORDINATED SPECIALTY CARE: Early Interventions for First Episode Psychosis -FEP</u></p> <p>Funding: \$323,455 for FFY 2014 (Mental Health Block Grant - 5% set-aside) Purpose: To support evidence-based programs that address the needs of individuals with or at risk of early serious mental illness, including psychotic disorders.</p> <p>Approximately 100,000 adolescents and young adults in the United States experience FEP each year; onset occurs b/t 15-25. Psychotic disorders such as schizophrenia can derail a young person's social, academic & vocational development and initiate a course of accumulating disability. Each year in KY, about 900, 18-24 year olds w/ schizophrenia or other related illnesses are admitted to a state operated psychiatric facilities. KY's Plan will focus on youth/ young adults b/t 15-30 w/ early serious mental health issues including schizophrenia, schizoaffective disorder, schizophreniform disorder, brief psychotic disorder, psychotic disorder NOS or related illnesses. RAISE & OnTrackNY models, w/ some modifications to include Oregon's Early Assessment and Support Alliance (EASA) model will be utilized. KY expects to develop a coordinated training & coaching model to support new and existing staff that will use the RAISE, OnTrackNY and EASA models of care. Funds will also be used to provide awareness training to families and community providers to increase understanding of mental illness & decrease stigma. This is not a new initiative or another program.</p>	<p>Detailed information on the TAYLRD Grant is available by contacting: Janice.Johnston@ky.gov</p> <p>Detailed information on the FEP Grant is available by contacting: Janice.Johnston@ky.gov</p> <p>Handouts on each Initiative were provided to SIAC and Guests on 12/10/2015</p>
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<p><u>Kentucky Strengthening Families</u></p> <p>Dr. Ruth Ann Shepherd, Director, Division of Maternal & Child Health (DPH)</p>	<p><u>MISSION:</u> Kentucky is strengthening families, promoting knowledge and skills, and providing access to resources and support by enhancing protective factors through family, community and state partnerships.</p> <p><u>VISION:</u> All Kentucky children are healthy, safe and prepared to succeed in school and in life through families that are supported and strengthened within their community.</p> <p><u>KY Principles:</u></p> <ul style="list-style-type: none"> • Promoting strong families and healthy development for families prenatally -age five • Partnering with all families and celebrating differences • Using protective factors as a strengths-based philosophy to buffer for toxic stress • Building knowledge and skills for individuals and for system change • Creating safe, nurturing environments to have responsive/caring relationships <p><u>KY Approach:</u></p> <ul style="list-style-type: none"> • Cross-system, multi-sector leadership <ul style="list-style-type: none"> ▪ Create supports for all families through systems change ▪ Families we care about are touched by many systems ▪ Systems face lots of transitions and uncertainty ▪ Workers often transition between systems <p><u>KY Workgroups</u></p> <ul style="list-style-type: none"> • Family Informed Systems • Training & Technical Assistance • Messaging & Awareness • Evaluation/System Integration <p><u>Next Steps for Kentucky:</u> Strategic Planning for Year 2 – January 8, 2015</p> <ul style="list-style-type: none"> • Continue Train the Trainer Overview Training Jan 22 • Imbed SF Protective Factors in STARS re-design • Develop Family-friendly messaging • Test Implementation Strategies • Establish Baseline Measures • Develop/refine Assessment Tools 	<p>In 2013, the Governor’s Office of Early Childhood and the Kentucky Department for Public Health convened a group inclusive of many organizations that touch families to explore the implementation of the Strengthening Families framework. These organizations are KY’s Strengthening Families Leadership Team; key stakeholders in Kentucky.</p> <p>To join the List serve for KY Strengthening Families: bit.ly/kystrengtheningfamilies</p> <p>For information about the presentation from Dr. Shepherd, contact: Tal.Curry@ky.gov</p>
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<p><u>Regional Interagency Council (RIAC) Update:</u></p> <p>Salt River Region Region 6S, (Bullitt, Shelby, Oldham, Spencer, Henry and Trimble Counties)</p> <p>Kelly Dorman (DCBS) Social Service Out of Home Specialist and RIAC Chair</p> <p>Andrea Keith (Seven Counties Services), Local Resource Coordinator (LRC),</p>	<ol style="list-style-type: none"> 1. Top 2-3 barriers/challenges your region experiences providing comprehensive and coordinated services and supports to children and youth? <ul style="list-style-type: none"> • Inconsistent attendance and participation from RIAC members • Lack of investment/collaboration b/t agencies in meeting needs of families/ kids • Lack of transportation • Consumers not having access to needed targeted case management and services at CMHCs due to financial restrictions to service provisions. • Modernization of finance aka resolution of wrap around. <p><u>How is your RIAC addressing these issues?</u></p> <ul style="list-style-type: none"> • Inconsistent attendance: We rotated monthly meetings among the six counties. • Sent outreach letters to specific community partner agencies to engage RIAC. • We provide food for RIAC members • Attempted to partner with other monthly meetings to increase attendance. • The other issues are being addressed with consistent and continued conversation at RIAC, within our respective agencies and through LIACs. • We make diligent efforts to build relationships at the field and regional levels to education and communicate around system issues. • With active LIACs in each of our counties, we are able to more effectively address case specific concerns/outcomes. 2. Describe 1-2 issues your RIAC addressed to improve services in the region? <ul style="list-style-type: none"> • With SEED grant, created a presentation for primary care physicians and pediatricians to educate staff about IMPACT for the 0-5 year old populations. • We followed the IMPACT nomination and acceptance with a letter to the referring provider to inform them of the outcome of their contact with IMPACT. • School staff collaboration meetings to improve service delivery. • LIAC level meetings/ members based on reported concerns • <p><u>LIACs- Region 6S-Salt River -Seven Counties Services CMHC/ Rural</u></p> <ul style="list-style-type: none"> ▪ Bullitt County LIAC ▪ Spencer LIAC ▪ Oldham County LIAC ▪ Shelby County LIAC ▪ Trimble County LIAC ▪ Henry County LIAC 	<p>Full RIAC Regional Reports distributed to SIAC Members/ Designees & Guests.</p> <p><u>RIAC Requests of SIAC</u></p> <ul style="list-style-type: none"> • RIAC/LIAC members to value the structure & attend regularly • Communicate benefits of workers involvement in a collaborative way; not by mandate • Help RIAC understand the future roles/structure of LIACs and RIACs • Support fidelity measures to keep IMPACT consistent with original intent
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<p>SIAC Annual Recommendations to Governor and SIAC Priorities</p>	<p><u>Per KRS 200.505</u>, the State Interagency Council (SIAC) is required to consider issues and make recommendations annually to the Governor and the Legislative Research Commission regarding the provision of services to children with (or now, at risk of developing) an emotional disability.</p> <p><u>SIAC Identified priorities and/ or possible annual recommendations for 2015:</u></p> <ol style="list-style-type: none"> 1. Monitor & decrease over-reliance on psychotropic meds for children/youth 2. Expand system of care values among SIAC member agencies 3. Increase evidence-based practices 	<p>Per SIAC Chair, if SIAC requests no modifications by 12/12/2014, identified recommendations will be forwarded to Governor & LRC via Secretary's Office (CHFS).</p>
<p>Data/Performance Indicators - Chris Duckworth, Evaluator KICC Grant (DBHDID)</p>	<p><u>Data/Performance Indicators</u></p> <p>Continuing to review DCBS and DJJ Out of Home Care Report by RIAC Regions; this data will also be reviewed regularly by SIAC and specifically within the CQI SIAC Standing Committee. CQI committee can look at this data closely and for analysis detail and report findings to the full SIAC.</p> <p>Implemented, through REACH Evaluation, the system to monitor activity/ attendance/ focus of RIACs and LIACs; this information will be provided to SIAC. This system will also track the attendance of the SIAC members and designees.</p>	
<p>System of Care Interagency/ Departmental Updates (SIAC Members and Designees)</p>	<p>DCBS: working on waiver every day. Waiting to hear on the pilot from Medicaid.</p> <p>Medicaid: addressing issues as they come up. Have some issues with Targeted Case Management and system issues that we are working to resolve. Looking at standards of care for children with special health care needs and will attend the meeting in DC that will address the interests of the Commission for Children with Special Health Care Needs.</p> <p>FRYSC: Focused on race to the top and kindergarten readiness – just released application for 26 more academies... there will be over 50 in 2015; connecting with local FRYSC and encouraging them to apply.</p>	

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	<p>CCSHCN: Autism clinic opened in 10/14 in Owensboro; Paducah's will open in 12/14; looking for 5 more in 2015.</p> <p>EDUCATION: working to launch school based screening. Yesterday was a challenging day of working together to solve problems to get the pilot launched.</p> <p>DJJ: as part of senate bill looking at rewards and punishments within the system. Looking at simplifying what we look for and one of the things we know that will happen in residential programs is that some kids will stay for shorter amounts of time and trying to change the behavior mod system to accommodate that. Looking at idea of letting treatment goals determine readiness to go home over the behavior mod system. One of the problems of JJ is criminalizing normal adolescent behavior. Looking at trying to reduce that. If they are already on probation that is what happens.</p> <p>AOC: Our thanks and appreciation to Commissioner Begley. Needed her leadership to push things along this year. It has rejuvenated and reinvested a lot of the partners. We appreciate that. Kudos to DJJ too in their culture shift and they are embracing it and taking it on.</p>	
Other Business	Agenda item for 1/28/2015: Region 15W request for SIAC oversight	Review during 1/28/2014 SIAC Meeting
Adjourn	Motion to adjourn; seconded/approved	
Next Meeting Date:	<p>January 28,, 2015 from 1:00 PM-3:00 PM</p> <p>Administrative Office of the Courts (AOC)</p> <p>1001 Vandalay</p> <p>Frankfort, KY.</p>	